Sutton County Commissioners Court

SPECIAL MEETING

Tuesday, June 30, 2026 at 9:00 a.m.

Sutton County Annex Meeting Room, 300 E. Oak, Sonora TX 76950

Joseph Harris	Lee Bloodworth	Bob Brockman	David Blesing	Harold Martinez
County Judge	*Commissioner Precinct 1*	*Commissioner Precinct 2*	*Commissioner Precinct 3*	*Commissioner Precinct 4*

Members of the public may give comments before the Commissioners Court on any item on this agenda. Please note that members of the public may not communicate to the court about any other subject not specifically mentioned on this agenda. Members of the Commissioners Court cannot discuss, deliberate, or act on any item or topic not scheduled on this agenda in accordance with existing law.

BUSINESS

1 Determination of quorum and call to order

AGENDA

Deliberate, Consider and take appropriate action regarding the following:

2 Discission and action on medical, dental, vision and life insurance plan renewals-Bobby Zesch

EXECUTIVE SESSION

Note 1 Texas Government code 551.071, Consultation with Attorney
Note 2 Texas Government code 551.072, Real Property
Note 3 Texas Government code 551.074, Personnel Matters
Note 4 Texas Government code 551.076, Security
Note 5 Texas Government code 551.087, Economic Development Negotiations
Note 6 Texas Government code 551.089, IT Security

The County Commissioners Court of Sutton County reserves the right to adjourn into executive sessions at any time during this meeting to discuss any of the matters listed below. The Court may also consider any other matter posted on the agenda if there are issues that require consideration in Executive Session and the court announces that the item will be considered during Executive Session.

RECONVENE

3 Public Comment

4 Adjournment

JOSEPH HARRIS, County Judge

SUTTON COUNTY, TEXAS
COUNTY JUDGE JOSEPH HARRIS

POSTED ON THE BULLETIN BOARD IN THE COURTHOUSE ANNEX BUILDING and the SUTTON COUNTY WEB PAGE www.co.sutton.tx.us this the **23rd day of June 2026.**

PAM THORP, County Clerk

2026 – 2027 Alternate Renewal Notice and Benefit Confirmation

Group: 94567 - Sutton County **Anniversary Date:** 10/01/2026

Return to TAC by: 07/06/2026

Please initial and complete each section confirming your group's benefits and fill out the contribution schedule according to your group's funding levels. Fax to 512-481-8481 or email to cassiev@county.org.

For any plan or funding changes other than those listed below, please contact Cassie Villarreal at 800-456-5974.

MEDICAL

Medical: Plan 1400-NG $35 Copay, $2000 Ded, 80%, $4000 OOP Max
RX Plan:
Your % rate change is: 16.00%
Your payroll deductions for medical benefits are: Pre Tax

Tier	Current Rates	New Rates Effective 10/01/2026	New Amount Employer Pays	New Amount Employee Pays	New Amount Employer Pays for Retiree (if applicable)	New Amount Retiree Pays (if applicable)
Employee Only	$0.00	$1,171.88	$1,171.88	$ 0	$1,171.88	$ 0
Employee & Spouse	$0.00	$2,538.74	$1,171.88	$1,366.86	$ N/A	$ N/A
Employee & Child(ren)	$0.00	$1,991.96	$1,171.88	$820.08	$ N/A	$ N/A
Employee & Family	$0.00	$3,358.94	$1,171.88	$2,187.06	$ N/A	$ N/A

JK **Initial to accept Medical Plan and New Rates.**

DENTAL

Dental: Plan II w/Ortho - 100% Prevent., $50 Ded, 80% Bas., 50% Major
Your % rate change is: 9.30%
Your payroll deductions for dental benefits are: Pre Tax

Tier	Current Rates	New Rates Effective 10/01/2026	New Amount Employer Pays	New Amount Employee Pays	New Amount Employer Pays for Retiree (if applicable)	New Amount Retiree Pays (if applicable)
Employee Only	$27.86	$30.44	$30.44	$ 0	$ N/A	$ N/A
Employee & Spouse	$57.18	$62.50	$30.44	$32.06	$ N/A	$ N/A
Employee & Child(ren)	$76.10	$83.18	$30.44	$52.74	$ N/A	$ N/A
Employee & Family	$105.40	$115.20	$30.44	$84.76	$ N/A	$ N/A

Initial to accept Dental Plan and New Rates.

EMPLOYEE SELF-SERVICE (ESS) INFORMATION

The ESS (mybenefits.county.org) allows employees to update employee and dependent demographic data and make election changes. Demographic updates are always enabled on the ESS. However, groups must opt in to allow election changes on the ESS.

Please select one option below to indicate if your group would like to allow employees to make election changes on the ESS. All changes made by employees on the ESS are reflected in real time on OASys and in available reports.

ESS: ☐ Allow election changes on the ESS XXDo not allow election changes on the ESS

Initial to confirm ESS Elections.

RETIREE INFORMATION

Please indicate how your group manages retiree coverage.

Your group allows retiree coverage for:

Medical: Pre-65 ☑ Post-65 ☐

Dental: Pre-65 ☐ Post-65 ☐

Initial to confirm Retiree Eligibility.

WAITING PERIOD

Waiting period applies to all benefits.

Employees	Elected Officials
Date of Hire	Date of Hire

Initial to confirm Waiting Period.

COBRA ADMINISTRATION

Please indicate how your group manages COBRA administration:

☑ Group process COBRA on OASys
** Group is responsible for fulfilling COBRA notification process and requirements.*

☐ BenefitConnect COBRA Department coordinates COBRA administration
** WTW BenefitConnect administers COBRA via contract between Group and TAC HEBP.*

☐ Group processes TAC HEBP Continuation of Coverage on OASys (< 20 employees)
** Group is responsible for fulfilling COBRA notification process and requirements.*

Initial to confirm COBRA Administration.

BROKER OR CONSULTANT INFORMATION

Please confirm your broker or consultant's information, if applicable.

☐ Broker ☐ Consultant

Agency Name	Zesch & Pickett Insurance LLP
Broker Representative	Bobby Zesch
Address	PO Box 431 San Angelo ,TX 76902
Phone	3256531448
Fax	
Email	bobbyz@zapins.com

Agency Name	
Consultant Representative	
Address	
Phone	
Fax	
Email	

JK **Initial to confirm Broker or Consultant information**

GROUP PHYSICAL MAILING ADDRESS

Please add your group's physical mailing address information:

Address	102 N Water Avenue Sonora, TX 76950

JK **Initial to confirm Physical Mailing Address.**

TAC HEBP Member Contact Designation

CONTRACTING AUTHORITY

As specified in the Interlocal Participation Agreement, the person signing this RNBC represents and acknowledges that they are authorized to sign on the county or district's behalf.

Please list changes and/or corrections below.

Name	Ms. Maura H. Weingart
Title	Auditor
Address	PO Box 16
	Sonora, TX 76950-16
Phone	3253875380
Fax	3253872379
Email	auditor@suttoncounty.org

BILLING CONTACT

Responsible for receiving all invoices relating to HEBP products and services.

Please list changes and/or corrections below.

Name	Yolanda Avila
Title	Assistant Auditor
Address	P.O. Box 16
	Sonora, TX 76950
Phone	3253875380
Fax	
Email	yolanda.avila@suttoncounty.org

COUNTY REPRESENTATIVE

HEBP's main contact for daily matters pertaining to the health benefits.

Please list changes and/or corrections below.

Name	Ms. Maura H. Weingart
Title	Auditor
Address	P.O. Box 16
	Sonora, TX 76950-16
Phone	3253875380
Fax	
Email	auditor@suttoncounty.org

HEALTHY COUNTY WELLNESS COORDINATORS

Primary contact regarding the Healthy County wellness program. Groups can designate up to two Wellness Coordinators.

Please list changes and/or corrections below.

Name	Yolanda Avila
Title	Assistant Auditor
Address	P.O. Box 16
	Sonora, TX 76950-16
Phone	3253875380
Fax	3253872379
Email	yolanda.avila@suttoncounty.org

Name	Richard Espinosa
Title	Assistant Auditor
Address	P.O. Box 16
	Sonora, TX 76950-16
Phone	3253875380
Fax	
Email	respinosa@suttoncounty.org

HEALTHY COUNTY WELLNESS SPONSORS

An elected or appointed official (preferred) who supports the administration of the Healthy County wellness program. Groups can designate up to two Wellness Sponsors.

Please list changes and/or corrections below.

Name	Maura Weingart
Title	Auditor
Address	PO Box 16
	Sonora, TX 76950-16
Phone	3253875380
Fax	
Email	auditor@suttoncounty.org

Name	
Title	
Address	
Phone	
Fax	
Email	

Initial to confirm Member Contact Designations.

HIPAA CERTIFICATION

Terms of the HIPAA Certification Agreement Signed by County/District contracting authority in order to receive Protected Health Information (PHI):

Note: In order for TAC HEBP to disclose PHI to a TAC HEBP member entity (such as a County or District that contracted for TAC HEBP benefits), the contracting authority must have signed the Certification, which includes the provisions set out below (unless the individual whose PHI is being disclosed has signed a HIPAA Authorization allowing their PHI to be disclosed for this purpose). The County/District is referred to an "EMPLOYER" in the Certification. Any County/District employee who receives PHI on the "EMPLOYER'S" behalf must comply with these terms. If you have any questions about whether the information you are receiving is PHI or these Certification provisions, please contact a member of the TAC Health and Benefits Services' team.
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As required under the HIPAA Standards for Confidentiality of Individually Identifiable Health Information, 45 CFR Parts 160 & 164 ("HIPAA Privacy Regulations"), the Plan Sponsor (EMPLOYER) certifies to the Texas Association of Counties Health Employees Benefit Pool (the "Plan") that, upon receipt of any Protected Health Information ("PHI"), EMPLOYER will comply with the provisions of the HIPAA Certification. These provisions include:

1. EMPLOYER certifies that it only will use or disclose PHI for plan administration purposes of the Plan, consistent with any Plan documentation and as permitted by law.

2. EMPLOYER will require that any agents or subcontractors to whom it provides PHI received under this Certification to agree in writing to the same restrictions and conditions that apply to COUNTY with respect to such information.

3. EMPLOYER agrees not to use or disclose any information received under this Certification for employment-related actions and decisions, or in connection with any other benefit or employee benefit plan sponsored by EMPLOYER.

4. EMPLOYER will report to the Plan any use or disclosure of information that is inconsistent with the uses or disclosures provided for under this Certification of which it becomes aware.

5. EMPLOYER will make available any information it holds under this Certification in order for Plan to comply with the access requirements under 45 CFR § 164.524.

6. EMPLOYER will make available any information it holds under this Certification in order for Plan to comply with the amendment requirements under 45 CFR § 164.526, and will incorporate any amendments to PHI it holds, as required in 45 CFR § 164.526.

7. EMPLOYER agrees to document and provide a description of any disclosures of PHI, and information related to such disclosures, as would be required for Plan to respond to a request by an individual for an accounting of disclosures of PHI in accordance with 45 CFR § 164.528.

8. EMPLOYER agrees to make its internal practices, books, and records relating to the use and disclosure of PHI received from the Plan available to the Secretary of Health and Human Services, for purposes of the Secretary determining the Plan's compliance with the HIPAA Privacy Regulations.

9. EMPLOYER will return or destroy all PHI received from Plan that EMPLOYER maintains in any form, including by agents or subcontracts, and retain no copies of such information, when it is no longer needed for the purpose for which the disclosure was made, except that, if EMPLOYER and Plan agree that such return or destruction is not feasible, EMPLOYER will limit further uses or disclosures of the information to those purpose that make the return or destruction of the information infeasible.

10. EMPLOYER will resolve issues of noncompliance with the terms of this Certification by persons entitled to use or disclose PHI under this Certification in a timely manner.

11. EMPLOYER will implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of any electronic PHI that it receives from the Plan, in accordance with the HIPAA Security Standards, 45 CFR Parts 160, 162.and 164. EMPLOYER will report to the Plan any security incident under the HIPAA Security Standards of which it becomes aware.

12. EMPLOYER will establish adequate separation between EMPLOYER and Plan, as required under 45 CFR § 164.504(f)(2)(iii) by limiting access to PHI to those employees or classes of employees listed below whom EMPLOYER has determined are entitled to use or disclose such PHI. EMPLOYER will require that these listed employees will receive HIPAA Privacy Training and only may use or disclose such PHI for plan administration functions, as defined in the HIPAA Privacy Regulations. Plan only will disclose PHI to the following employees whom EMPLOYER has determined are entitled to receive PHI.

Maura Weingart for Sutton County

Printed Name of Contracting Authority

Maura Weingart 6/30/2026

Signature of Contracting Authority **Date**

PLAN INFORMATION

- RNBC must be received by 07/06/2026 to avoid additional administrative fees.
- Signature below is required to confirm and accept your group's renewal.
- Rates based upon current benefits and enrollment. A substantial change in enrollment (10% over 30 days or 30% over 90 days) may result in a change in rates.
- If applicable, retiree rates are the same for medical, dental, and vision as active employees regardless of age.
- If applicable, broker commissions are included in rates.

JA **Initial to confirm Plan Information.**

RENEWAL CONFIRMATION SIGNATURE

Joseph Harris

Signature of County Judge or Contracting Authority

Date: 07/01/2026

Joseph Harris

Please PRINT Name and Title

The Texas Association of Counties would like to thank you for your membership in the only all county-owned and county directed Health and Employee Benefits Pool in Texas.

2026 – 2027 Alternate Plan Proposal

Group: 94567 - Sutton County

Effective Date: 10/01/2026

	Current Plan Year	Renewal Rates	Option 1	Option 2	Option 3
Plan:	**Plan 1100-G2**	**Plan 1100-G2**	**Plan 1200-NG**	**Plan 1300-NG**	**Plan 1400-NG**
Option:	**RX-3A-G2**	**RX-3A-G2**	**RX-3A-NG**	**RX-3A-NG**	**RX-3A-NG**
Rates					
Employee Only	$1,075.16	$1,247.18	$1,271.12	$1,222.02	$1,171.88
Employee & Spouse	$2,331.50	$2,704.54	$2,757.28	$2,649.16	$2,538.74
Employee & Child(ren)	$1,828.94	$2,121.56	$2,162.78	$2,078.26	$1,991.96
Employee & Family	$3,085.40	$3,579.06	$3,649.06	$3,505.54	$3,358.94
Medical Plan					
Deductible In/Out Network	$1030/1370	$1030/1370	$1000/3000	$1500/4500	$2000/6000
Co-Insurance% In/Out	80/60	80/60	80/60	80/60	80/60
Co-Insurance Maximum	$4100/8200	$4100/8200	$3000/6000	$3500/7000	$4000/8000
Office Visit	$30	$30	$30	$30	$35
Specialist Visit					
Emergency Room Hospital	$135	$135	$150	$150	$150
Prescription Plan					
Prescription Card Co-Pay	$15/25/45	$15/25/45	$10/20/35	$10/20/35	$10/20/35
Deductible	$0	$0	$0	$0	$0

Proposal rates are based on the following information:

- Rates based upon current benefits and enrollment. A substantial change in enrollment (10% over 30 days or 30% over 90 days) may result in a change in rates.
- Rates are based on a minimum employer contribution of 100% of the employee only rate or current funding level.
- Retirees pay the same premium as active employees regardless of age for medical and dental.
- Form must be received by 06/26/2026 in order to avoid a delay in implementation of benefits and/or late processing fees.

Please indicate the selected plan here Option 3, Plan 1400-NG, RX-3A-NG

Fax the signed document to 512-481-8481 or email to cassiev@county.org.

Signature Maura Weingart Date 7/2/2026

TEXAS ASSOCIATION of COUNTIES
HEALTH AND EMPLOYEE BENEFITS POOL

PRESCRIPTION DRUG PLAN
OPTION 3A-NG NO DEDUCTIBLE

Prescription Drug Program

Up to a 30-day Supply at Participating Navitus Health Solutions Network Retail Pharmacy

Plan Year Deductible	*$0 Individual / $0 Family*
Tier 3 Drug	*$35 Copayment Amount*
Tier 2 Drug	*$20 Copayment Amount*
Tier 1 Drug	*Lesser of $10 Copayment Amount* **OR** *Actual Cost*

ATTENTION: Please note the following guidelines regarding your Prescription benefits:

1) Members electing to purchase brand name drugs when a generic is available will be required to pay the difference between the cost of the Generic drug and Brand Name drug, plus the Brand Name Copayment.
2) Specialty and biotech medications are available only through mail order unless purchased and administered through the doctor's office.

Up to a 90-day supply at In-Network Retail or Mail Service Pharmacy

Tier 3 Drug	*$70 Copayment Amount*
Tier 2 Drug	*$40 Copayment Amount*
Tier 1 Drug	*$20 Copayment Amount*

Note: Prescription Drug Benefits are provided by Navitus Health Solutions through a master contract with the Texas Association of Counties Health and Employee Benefits Pool. Prescription Drugs are not administered by Blue Cross and Blue Shield of Texas

Initials _____ Date 7/2/2026

Yolanda Avila

From: Cassie Villarreal <CassieV@county.org>
Sent: Thursday, July 2, 2026 8:45 AM
To: Maura Weingart
Cc: 'Yolanda Avila'
Subject: Re: SUTTON COUNTY 2026-2027 RENEWAL
Attachments: TAC HEBP Option 3A-NG.pdf

Hi,

I just realized the RX plan is changing as well with the alternate plan that was selected.

Can you please initial and date the attached RX form pleaseeeee.

Thank you,

Cassie Villarreal
Employee Benefits Specialist
Health & Benefits Services
cassiev@county.org | www.county.org
Direct: (512) 615-8943
Toll-free (800) 456-5974
1210 San Antonio St. Austin, TX 78701

The mission of the Texas Association of Counties is to unite counties to achieve better solutions.

TAC Way Fundamental #11. ALWAYS REMEMBER THAT WE'RE A TEAM. You are part of a team as diverse as the 254 counties we serve. Never forget that our diversity is our strength. Take time to get to know those with whom you work, internally and externally. Strong relationships are the foundation of a successful organization, and they enable us to work through difficult issues and challenging times. Stand for and support each other's success. Look for the best in each other, and provide rigorous support, including honest and direct feedback. Remember everyone brings their own unique skills, talents and insights that ultimately translate into team success.

From: Cassie Villarreal <CassieV@county.org>
Sent: Thursday, July 2, 2026 7:04 AM
To: Maura Weingart <auditor@suttoncounty.org>
Cc: 'Yolanda Avila' <yolanda.avila@suttoncounty.org>
Subject: Re: SUTTON COUNTY 2026-2027 RENEWAL

Hi Maura and Yolanda,

It looks like the only item missing is the attached Alternate Plan Proposal form. When you have a chance, could you please complete it and send it back at your earliest convenience?

Once we receive it, we'll be able to move things forward. Please let me know if you have any questions or need any assistance completing the form.

SUTTON COUNTY RETIREE INSURANCE BENEFIT REDUCTION

To: All Sutton County Elected Officials, Employees, Retirees and Tax Payers

We want to inform you that the Commissioner's Court will be considering options that could change or eliminate the retiree health insurance benefits we currently provide. Under our current policy the county pays 100% of the premium for retirees up to the age of 65 who have a minimum of 20 years of service and were employed prior to March 16, 2016. In addition, the county pays 100% of the premium for 1 year for the retirees who have a minimum of 20 years of service and were hired on or after March 16, 2016. This is a matter in which the commissioners are taking careful consideration of concerning our obligations to our employees, obligations made by their predecessors to our employees, the yearly rising operational costs, the long-term financial stability of the county, their duty to safeguard public funds and their duty to represent the interests of the taxpayers.

This item will be on the July 13, 2026, Commissioners Court Agenda that will be held at 9:00 am in the Courtroom of the Sutton County Courthouse, 102 N. Water Ave., Sonora, Texas. This Item will be open for discussion and the Commissioner's Court welcomes constructive suggestions from retirees, employees and the public. If you would like to speak there will be a signup sheet available that will be picked up prior to the commencement of the meeting. Each speaker will be limited to 2 minutes.

We understand this is not a decision that is to be taken lightly and we understand that any changes may affect our retiree's retirement planning. We are committed to being transparent throughout this process and ask for your understanding as we navigate through this issue together.

Judge Jody Harris - judge.harris@co.sutton.tx.us
Lee Bloodworth, Pct 1 - Commissioner1@co.sutton.tx.us
Bob Brockman, Pct 2 - Commissioner2@co.sutton.tx.us
David Blesing - Commissioner3@co.sutton.tx.us
Harold Martinez - Commissioner4@co.sutton.tx.us